



*Maria Cantwell*  
**United States Senate**

WASHINGTON, DC 20510-4705

Statement of Senator Maria Cantwell  
CARES Hearing  
Jonathan M. Wainwright VA Medical Center  
Walla Walla, Washington  
September 29, 2003

I regret that I am not able to join you today for this important hearing. I appreciate the opportunity to submit written testimony on behalf of over 672,000 veterans in Washington state.

I am acutely aware of the challenges that the CARES Commission faces as it seeks to determine how best to provide care to veterans over the next several decades. As we move forward in this process, I believe that we must always remember that our veterans are one of the greatest assets of this country. These brave men and women have made tremendous sacrifices to defend and preserve our great nation, along with our freedoms and our way of life.

While it is easy to talk about the importance of veterans, we must always back up our talk with action to show veterans that we do truly value them and their families. As such, it is imperative that we guarantee quality and affordable health care for all veterans and provide the Department of Veterans Affairs (VA) with the resources to do this task. Throughout my state, I have heard from thousands of veterans who have told me about the high quality of care that they have received in VA hospitals.

Although I am pleased that veterans in my state are receiving this care, I share their concerns about the delays, waiting times and long distances many must drive for such care. One of my constituents from Spokane recently shared his experience with me. He was referred to the Walla Walla VA Medical Center by the Spokane VA hospital where he normally receives care. After waiting for his first appointment for six months, it was discovered that he had a respiratory problem that caused him to stop breathing in his sleep. Despite the discovery of this very serious problem, it took another four months for him to receive a follow-up appointment.

This is absolutely unacceptable. We should not treat our nation's heroes in this manner. I am working hard with my colleagues in Congress to provide the VA with the resources it needs to reduce these delays and to continue to provide excellent care. Any proposal from this Commission must provide details about how the Commission intends to decrease waiting time without compromising care.

Given my efforts to decrease the time it takes for veterans to receive medical attention, I was shocked and saddened by reports that the VA was considering closing three veteran's hospitals in my state: American Lake, Walla Walla and Vancouver.

While I am pleased that the VA has decided not to close American Lake, I remain concerned about the fate of the Walla Walla and Vancouver facilities and strongly object to closing these facilities.

Closing these facilities will only exacerbate the problem that veterans face in my state. Over 200,000 Washington veterans are over the age of 65 and veterans constitute over 30 percent of our total elderly population. The Washington State Department of Veterans Affairs predicts that the number of veterans here will rise considerably in future years. With more and more veterans making Washington state their home, it is absolutely imperative that we provide the necessary services.

I understand that changes may need to be made to existing veterans' facilities and I am pleased that the Commission is conducting these field hearings and obtaining comments from veterans on suggested changes to VA facilities. I have asked veterans in my state to contact me with their experiences, concerns and suggestions for how such changes should be made. I have received mail from hundreds of Washington state veterans and I am including these letters with my testimony for the Commission's review in conjunction with my testimony.

Not surprisingly, the biggest concern that my constituents have is to ensure that veterans continue to receive high quality care. I understand that the CARES Commission has also proposed contracting out medical services to the community. Before making such a major change, we must guarantee that veterans continue to receive the high quality of care that they currently receive and to which they are entitled. We must ensure that there are enough medical providers to provide care to veterans wherever and whenever necessary. I encourage the CARES Commission to work with the VA hospitals in my state as well as the Washington State Department of Veterans Affairs and veterans organizations to ensure that these services are available, and supported by quantifiable data.

I understand that there have also been discussions about moving the nursing home unit from Walla Walla to the Spokane VA Medical Center. I am concerned that this may move veterans away from their families and friends and dramatically increase the time it takes to see loved ones. In fact some families may not be able to visit loved ones if the nursing home is moved several hours away. Relocating veterans with health problems will not be an easy task. Before undertaking such a move, the Commission should ensure that Spokane has the capacity to adequately care for these patients. If the Commission decides to move these patients, it must guarantee that Spokane has the capacity to provide appropriate levels of care.

I believe that the Walla Walla VA Medical Center must continue to provide needed services to veterans. Many of the buildings that care for our veterans are over fifty years old and I agree that new facilities should be built on this campus to provide care for veterans. Should such buildings be constructed, I believe the VA has an obligation to work with the city of Walla Walla to come up with an acceptable and feasible plan to renovate these older structures.

In addition to ensuring quality care for veterans, I believe we must also consider the hard working employees who have dedicated their lives to caring for these veterans and for their service to the public. In a time when our economy has lost three million jobs in three years, we cannot afford to put good, hard working people out of work. These workers are knowledgeable about the specific circumstances facing veterans and have a great deal of expertise that should continue to be utilized. The Commission needs to quantify how these outsourcing changes will impact veterans, the quality of care they receive, and the effect on waiting periods for medical attention. Without having this detailed information, I am skeptical about moving forward in this manner.

I sincerely hope that the Commission takes the time it needs to study all of the testimony and comments from veterans throughout the country. This is an opportunity for our nation to rise up and provide the care that our veterans have been promised. I look forward to working with the Commission to accomplish this goal.

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(H)

## U.S. Sen. Ron Wyden's testimony before the CARES Commission

Walla Walla, Washington

Sept. 29, 2003

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I appreciate the opportunity to make a statement on behalf of Oregon veterans.

The CARES Commission is doing important work, and it has a difficult task. I commend the CARES Commission's efforts to enhance and modernize VA health care services around our state and nation. I believe it is our duty to improve the health services that all veterans are entitled to for their patriotic and selfless service to our country. We must honor this service by meeting the health care needs of veterans of every generation. Today, I am pleased to share with the Commission the input, comments and concerns I have heard from veterans all around Oregon.

The facilities here in Walla Walla are crucial to the health and well-being of veterans living in northeastern Oregon. In the five northeastern Oregon counties, there are, by the VA's count, more than 13,000 veterans. Of the nearly 4,000 veterans in that area who sought health care through the VA system last year, 70 percent of them came to Walla Walla.

As many of you may now know, northeastern Oregon and southeastern Washington are very rural, and distances between facilities are great. A veteran in Union, Ore., is 90 miles from Walla Walla, through a road that many dare not use in winter. That veteran lives 160 miles from Boise, 270 miles from Spokane, and 270 miles from Portland. There is no public transportation, other than bus service, to those VA facilities. Severe cutbacks at the Walla Walla facility would result in serious lack of access to care for veterans in northeastern Oregon. Many would simply find it impossible to get the health care they need and have earned. This would be unacceptable.

I've been told that the Walla Walla facility is considering eliminating inpatient and psychiatric beds, and contracting with hospitals in the area. That may be a good solution to the difficulties with outmoded hospital facilities, and it could be a good solution for veterans – provided they have a choice in where they are able to be hospitalized. If this is the route the VA chooses, it should pursue contracts with hospitals throughout the region, so veterans have a chance to be hospitalized close to home.

Whatever route is taken here regarding the hospital beds, or the nursing home, the VA should not make decisions without direct input from the veterans who depend on this facility.

I also urge the VA to consider opening a clinic to serve veterans in Union, Baker and Wallowa counties. A veteran in Enterprise is 100 miles from Walla Walla, and a veteran in Baker City is 130 miles from Walla Walla and 120 from Boise. There are nearly 6,000 veterans in those three counties and they deserve better access to health care.

It's important to comment on the nature of these hearings. The CARES Commission has an ambitious schedule. It's important for it to get out to as many places as possible, and I appreciate the Commission's effort to do so. I also appreciate the effort made to gather the panels for these hearings. They are good people, and will give the Commission good insight into the needs of our veterans.

Unfortunately, there is a perception that public comment is not welcome during these hearings. Information about the hearings, and about the issues being considered, has been scant, and the Commission has chosen to prohibit verbal comments from individual veterans at these hearings. The decisions made by the Commission will directly impact access to care for veterans and denying them verbal input into this process is wrong.

Everyone of us in this room knows that our country has made a social contract with veterans, that we made promises to them in exchange for them being willing to appear in harm's way to protect the people of the United States. Their right to health care is part of that social contract, and we must all keep that promise.

I want to express my appreciation to the CARES Commission, the members of the panels, and especially to the veterans who came here, some from great distances, despite knowing they would not be able to speak.

PATTY MURRAY  
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JUDY OLSON, STAFF

## United States Senate

WASHINGTON, DC 20510-4704

(H)

### STATEMENT

*Senator Patty Murray*

*United States Senator*

*Department of Veterans Affairs'  
Capital Asset Realignment for Enhanced Services Initiative*

*Walla Walla, WA -- September 29, 2003*

Let me begin by thanking all of the people in the audience and the witnesses for coming today to support the veterans in Southeastern Washington, Eastern Oregon and Western Idaho, and the employees who work so hard for them at the Jonathan M. Wainright Memorial VA Center here.

I want to congratulate all of the veterans here today rallying around the Walla Walla VA Medical Center. We are here to discuss your VA facility and your access to health care in your community.

I also want to thank the CARES Commission for coming to Walla Walla, so they can listen to all of the testimony and make an informed decision. Though I wish your visit were under different circumstances, this community and the State of Washington is honored to host such a distinguished group of veterans and veterans' advocates.

I appreciate the task before the Commission including your consideration of the Walla Walla VA Medical Center's importance to the veterans throughout the region.

I support of the idea behind CARES. I think it's important that we realign services so we can better meet the needs of our veterans. Like the witnesses at today's hearing, I am committed to supporting a robust VA health care system in which our veterans receive the highest quality care in a timely fashion.

Unfortunately, I now fear the CARES process is losing its legitimacy. The Draft Report presented to the Commission by the Department of Veterans Affairs has been undermined by the VA itself.

As we all know -- under the CARES initiative -- the Department of Veterans Affairs asked its regional offices to study the health care needs of local veterans and to develop a plan to meet those needs.

VA planners in the field are to be commended for the excellent way in which stakeholders were involved in the CARES planning. However, as this process moved forward, there have been some troubling revelations, including the fact that stakeholder input has been seriously compromised.

Local experts in the VISN 20 region, which includes Alaska, Idaho, Oregon, and Washington, submitted a plan several months ago just as their counterparts did all across the country. The VISN 20 report highlighted significant gaps in outpatient primary, specialty, and mental health care and inpatient psychiatry, as well as access to primary, acute hospital and tertiary care.

The VA sat on this report for several months. The individual plans sent to Washington, DC were seen – and in most cases – approved by all relevant constituencies. But, just eight days before the scheduled release of the national report, the VA directed VISN leaders all across the country to rewrite their plans. The VA directed VISN leaders to resubmit local plans with specific language calling for the potential closure of more than two dozen facilities including Walla Walla.

The CARES process is supposed to provide an objective accounting of the VA's ability to meet the increasing healthcare needs of our veterans. Here are my immediate concerns about the cares process.

1. CARES is being driven more by budget concerns rather than the healthcare needs of our veterans. The CARES Commission must ensure that the VA's desire to generate revenue through enhanced use lease arrangements does not come at the expense of veterans.
2. Another troubling aspect of the CARES process is the apparent disregard of veterans' long-term care and mental-health needs.

The VA readily acknowledges that the number of veterans age 75 and older will increase from 4 million to 4.5 million by 2010.

Both the VA and the GAO estimate that the veterans population most in need of nursing home care – veterans 85 years old or older – is expected to triple to over 1.3 million by 2012 and remain at that level through 2023.

Clearly we've got to do more – not less – to meet this growing need. Instead, the report under review by this Commission calls for thousands of long-term care and inpatient psychiatric beds to be closed. The VA "Draft" plan fails veterans on long-term care.

3. The CARES process offers a false promise to veterans. The VA asks veterans to agree to significant realignment of VA facilities including the closure of some vital facilities. In exchange, the VA holds out the promise of new clinics, services and hospitals.

The false promise is all of the incentives for veterans are based on future appropriations that require the President's leadership. We are in the midst of a battle with the Administration and the VA over funding VA health care right now.

I am concerned the Administration will not request the money to fund new services to veterans. With record budget deficits, there is no guarantee veterans will get new services.

Now let me turn to the Walla Walla VA Medical Center. I want the Commission to know that my staff and I have visited this facility several times, most recently in August. And, I am absolutely opposed to the closure of this facility.

And let's not forget that there is a federal law – on the books since 1987 – that prohibits changing the mission of the Veterans Administration Medical Center in Walla Walla.

The Walla Walla VA Medical Center serves approximately 69,000 veterans in a 42,000 square-mile area in parts of southeastern Washington, northeastern Oregon and western Idaho, providing primary care, as well as inpatient medical and psychiatric care. This facility is also one of the largest employers in the area and is staffed by dedicated public servants who do wonderful work on behalf of our veterans.

While realizing that inpatient acute care and nursing home care levels here in Walla Walla do not meet with CARES target requirements, closing this facility or curtailing the services it provides would cause unacceptable hardships for the veterans in VISN 20.

The veterans of the rural region served by the Walla Walla VA Medical Center already must travel long distances and face significant delays in obtaining health care. VISN 20 has determined that almost 40 percent of veterans who receive primary care within the Inland North Market live outside the 30-45 minute standard for access to care.

Without the benefit of the Walla Walla VA Medical Center and in the absence of a Community Based Outreach Clinic, these geographically isolated veterans would be forced to travel to Portland, Spokane, or Boise VA Medical Centers for routine care. The closest, being Spokane, which is 180 miles away, and that possibility is simply unacceptable.

Furthermore, the Spokane VA Medical Center, which currently has a list of nearly 3,000 veterans waiting to see a primary care physician. Closure of the Walla Walla VA Medical Center would be forced to pick up additional patients currently receiving care at this facility, further overburdening an already overwhelmed facility.

The veterans in Washington State deserve shorter waiting lists and more access to care – not less. I encourage the commission to take a long look at the geography and demographics of Washington and instead of closing the Walla Walla facility, opening at least one additional Community Based Outreach Center in Central or Eastern Washington.

In closing, I implore the members of the Commission to take a fresh look at the overall CARES process. I encourage you to closely review the original VISN 20 submission prior to the interference from VA headquarters. I hope you will take into consideration where the veterans currently served by the Walla Walla VA Medical Center will have to go to seek treatment and whether any VISN 20 facility is equipped to handle such an influx of patients. I also hope the Commission considers that state budget crises in Washington, Oregon and Idaho that have resulted in overburdened hospitals and urgent care clinics.

The Walla Walla VA Medical Center facility is absolutely necessary to meet the diverse needs of this region's veterans' population.

I again thank the members of the commission for coming to Walla Walla. We have a tremendous interest in the challenge before you and we look forward to working closely with you and the VA.



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*WALLA WALLA*

September 29, 2003

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TO: CARES Commissioners:

This historic place has been the site of a Federal facility since 1858. The land we are on was released in 1921 for the development of a Veterans Hospital and ever since the Veterans Administration has had a presence here.

The region served by the Walla Walla Veterans Medical center is large and quite rural. It covers the southern portion of my Congressional District as well as major portions of Oregon, and Idaho.

I already have concerns that our health care delivery systems in the Inland Northwest have not provided adequately for rural residents. I am concerned that the Veterans Administration Capital Asset Realignment for Enhanced Services (CARES) evaluation may perpetuate this problem. My highest priority is to maintain quality care for veterans regardless of the economic concerns of the CARES commission. The proposed CARES plan for this facility would maintain outpatient services and contract for acute inpatient medicine, psychiatry care, and nursing home care. The plan also notes that the campus will be evaluated for alternative uses. My fear is that veterans in the communities this facility serves will be forced to travel long distances for their care under this plan.

I urge the Commission to closely evaluate the possible consequences of the proposed changes in care for veterans, not just in Walla Walla, but in the many other communities it serves. If the facility's mission becomes solely outpatient care, the Commission must evaluate whether these communities have the capacity to deliver the services that are being contracted in those communities. It would be a shame for the Commission to move forward with this plan and find out that the communities do not have the psychiatric care capacity to offer veterans. It is my understanding that Walla Walla County does not have psychiatric inpatient services. This would force veterans to seek care many miles away from their homes. The same is true for veterans that would be moved from the nursing home. If there isn't community access, these veterans will be moved away from their families and friends, when they most need these relationships.

The proposal to evaluate the campus for alternative uses needs to be dealt with very carefully. The U.S. Army vacated this facility in 1910. It took eleven years before Walla Walla was able to get the facility transferred to the then U.S. Public Health Service for development as a VA Hospital. More recently the U.S. Army Corps of Engineers left

a “temporary” facility at the Walla Walla Airport (after some 40 years) to move into a new District Headquarters in downtown Walla Walla, with no provision for the use or destruction of the old facility. I had to obtain a special Department of Defense appropriation to provide for the demolition and cleanup of the old headquarters. I do not want to face that kind of situation again with the Walla Walla Veterans Administration Medical Center. Nearly all of these building are very old and do not reach current building and fire codes. For any alternative uses for this facility there will need to be extensive evaluations of the associated costs. At the same time, the campus is an excellent location for alternative uses, and I will look forward to working through this issue with the VA.

It is also important for me to note that the Veterans Administration is one of the main employers in town. I have stressed that veteran’s care is of utmost importance earlier, but I must remind the Commission that their actions radiate much further then veterans. This community depends upon and is proud of our Veterans Hospital.

Caring for the people that served our country is an honorable cause and I will continue to watch the progress of the CARES Commission with the hopes that the Veterans Administration keeps this cause in mind.

Respectfully submitted,

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# Congress of the United States

## House of Representatives

WALLA WALLA

Statement of Congressman Doc Hastings  
CARES Commission Public Hearing  
September 29, 2003

(14)

Keeping our nation's commitment to those who served to protect our freedoms is a national priority. The war on terror is only the most recent reminder of the debt our nation owes to those brave men and women who have risked their lives to protect the lives and freedoms of all Americans. Promises were made to our veterans by the government and those promises must be kept.

As proposals to address the long-term infrastructure needs of the Veterans Administration are considered, we must ensure that veterans' services are improved. Any plan for restructuring VA medical centers must result in enhanced access to health care for veterans – particularly those veterans in rural areas.

In Central Washington, our veterans live great distances from VA medical centers in Seattle, Spokane and Walla Walla. It is not uncommon for veterans who reside in my Congressional district to have to drive hours and wait months for even the most basic health care services. This is an unacceptable burden to place on our veterans and their families. Our veterans deserve better access to care than they currently receive.

The Secretary of Veteran's Affairs, Anthony Principi, established the Capital Asset Realignment for Enhanced Services (CARES) Commission last December to undertake a nationwide review of the VA infrastructure system and determine how best to improve veterans' services over the next 20 years.

The Commission's draft recommendations call for continuing outpatient care at the Walla Walla center, with an end to inpatient services. Some services would be provided through contracts with local health care providers.

I urge the Veterans Administration to carefully examine how changes in the operations of the Walla Walla center would impact veterans' services in Washington state. Veterans in this area need greater access to health care – not less.

As the Commission considers the future of Walla Walla and other facilities across the country, they must keep the goal of improving services foremost in their minds. Questions should be asked and answered: How would any change enhance the care of our veterans in Washington state and the surrounding area? How would a change in service impact those veterans who are directly served by the facility? How will the veterans who currently must travel long distances and wait longest for care be helped?

I am a cosponsor of legislation that would require the Secretary's final restructuring plan to be placed on hold for 60 days to allow Congress to review his decisions. Congress should take an oversight role in planning for the future needs to our veterans. It is important to ensure that taxpayer dollars are spent responsibly, and in a way that most benefits our veterans. It's unacceptable for any plan to result in decreased care for Washington veterans.

Lastly, I urge the Commission to approach its responsibilities and complete its task in such a way that no veteran has cause to be apprehensive about your recommendations to the Secretary.